

<b>CLAIMS ONLY</b>						SERIAL NO.	FILING DATE		
						APPLICANT(S)			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1									
2									
3									
4									
5									
6	1								
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8									
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11	1								
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46									
47									
48									
49									
50									
TOTAL IND.	3								
TOTAL DEP.	8								
TOTAL CLAIMS	11								
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS									